



40071

2007
TC-40

Fiscal Year

Form 8886

9998

Utah State Income Tax Dollars Fund Education

• Amended Return

Utah Individual Income Tax Return

X if deceased

Your Soc. Sec. No.

Spouse's SSN

1 Filing Status - enter code	2 Exemptions - enter number	3 Election Campaign Fund - enter code
A = Single •	a Yourself	C = Constitution Yourself Spouse
B = Head of Household	b Spouse } from federal return	D = Democratic • •
C = Married filing jointly	c Dependents	R = Republican
D = Married filing separately	d Disabled dependents - see instr.	N = No contribution Does not increase tax or reduce refund
E = Qualifying widow(er)	e Total exemptions (add a through d)	

4 a Federal adjusted gross income	• 4 a	add lines 4a & 4b
4 b Additions to income from form TC-40S, Part 1	4 b	4
5 a State tax refund included on federal form 1040	• 5 a	add lines 5a & 5b
5 b Deductions from income from form TC-40S, Part 2	5 b	5
6 Modified federal adjusted gross income (subtract line 5 from line 4)	• 6	
7 State income tax deducted as an itemized deduction on federal form 1040, Sch. A	• 7	
8 Total adjusted income (add lines 6 and 7)		8
9 a Standard or itemized deduction	• 9 a	
9 b Personal exemptions deduction (multiply \$2,550 by line 2e, unless limited)	• 9 b	
9 c One-half of the federal tax	• 9 c	
9 d Retirement exemption/deduction - TC-40B. Check box(es) if age 65 or over	• 9 d	• TP • SP
9 e Other deductions from form TC-40S, Part 3	9 e	9
1 0 Utah taxable income (subtract line 9 from line 8) If less than zero, enter zero	• 1 0	
1 1 Enter "X" if you are a qualified exempt taxpayer (see instructions)	• 1 1	
1 2 Traditional tax calculation (calculate tax from tax rate schedule)	• 1 2	
1 3 Single rate tax calculation (multiply line 6 by .0535) See instr for UESP credit	• 1 3	
1 4 Utah income tax (enter the lesser of line 12 or line 13)		1 4
1 5 FOR NON OR PART-YEAR RESIDENTS ONLY - Attach form TC-40C	• Nonresident	• Part-year resident
Box a - from Col. A, line 32	Box b - from Col. B, line 32	Box c - Utah income tax ratio (Line 14 x Box c)
L •	/ •	= • 1 5

Last name

SSN

1 6	Enter tax (full-year resident, enter tax from line 14 - non or part-year resident, enter tax from line 15)	1 6																																			
1 7	Nonrefundable credits from form TC-40S, Part 4	1 7																																			
1 8	Subtract line 17 from line 16 (Note: if line 17 is greater than or equal to line 16, enter zero)	1 8																																			
1 9	Contributions - add lines 19a through 19e and enter total contributions on line 19																																				
	<table border="0"> <thead> <tr> <th>Code</th> <th>Description</th> <th>Code</th> <th>Amount</th> <th>Sch Dist Code</th> </tr> </thead> <tbody> <tr> <td>0 1</td> <td>Utah Nongame Wildlife Fund</td> <td>• 1 9 a</td> <td></td> <td></td> </tr> <tr> <td>0 2</td> <td>Pamela Atkinson Homeless Trust Fund</td> <td>• 1 9 b</td> <td></td> <td></td> </tr> <tr> <td>0 3</td> <td>Kurt Oscarson Children's Organ Transplant Fund</td> <td>• 1 9 c</td> <td></td> <td></td> </tr> <tr> <td>0 5</td> <td>School District & Nonprofit School District Foundation</td> <td>• 1 9 d</td> <td></td> <td></td> </tr> <tr> <td>0 8</td> <td>Wolf Depredation Fund</td> <td>• 1 9 e</td> <td></td> <td>1 9</td> </tr> <tr> <td>0 9</td> <td>Cat & Dog Community Spay and Neuter Program</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Code	Description	Code	Amount	Sch Dist Code	0 1	Utah Nongame Wildlife Fund	• 1 9 a			0 2	Pamela Atkinson Homeless Trust Fund	• 1 9 b			0 3	Kurt Oscarson Children's Organ Transplant Fund	• 1 9 c			0 5	School District & Nonprofit School District Foundation	• 1 9 d			0 8	Wolf Depredation Fund	• 1 9 e		1 9	0 9	Cat & Dog Community Spay and Neuter Program				
Code	Description	Code	Amount	Sch Dist Code																																	
0 1	Utah Nongame Wildlife Fund	• 1 9 a																																			
0 2	Pamela Atkinson Homeless Trust Fund	• 1 9 b																																			
0 3	Kurt Oscarson Children's Organ Transplant Fund	• 1 9 c																																			
0 5	School District & Nonprofit School District Foundation	• 1 9 d																																			
0 8	Wolf Depredation Fund	• 1 9 e		1 9																																	
0 9	Cat & Dog Community Spay and Neuter Program																																				
2 0	AMENDED RETURNS ONLY - previous refund	• 2 0																																			
2 1	Recapture of low-income housing credit	• 2 1																																			
2 2	Utah use tax	• 2 2																																			
2 3	Total tax, use tax and additions to tax (add lines 18 through 22)	2 3																																			
2 4	UTAH TAX WITHHELD (must attach W-2s and/or 1099 forms)	• 2 4																																			
2 5	Credit for Utah income taxes prepaid	• 2 5																																			
2 6	AMENDED RETURNS ONLY - previous payments	• 2 6																																			
2 7	Refundable credits from form TC-40S, Part 5	2 7																																			
2 8	Total withholding and credits (add lines 24 through 27)	2 8																																			
2 9	Tax Due - if line 23 is greater than line 28, subtract line 28 from line 23	TAX DUE • 2 9																																			
3 0	Penalty and interest	3 0																																			
3 1	Pay this amount (add lines 29 and 30)	3 1																																			
3 2	Refund - if line 28 is greater than line 23, subtract line 23 from line 28	REFUND • 3 2																																			
3 3	Enter the amount of refund you want applied to your 2008 taxes	• 3 3																																			
3 4	DIRECT DEPOSIT YOUR REFUND. Complete information below. <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div> • Routing number </div> <div> • Account number </div> <div> Acct type <div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">checking</div> <div>•</div> <div style="margin-right: 10px;">savings</div> <div>•</div> </div> </div> </div>																																				

Under penalties of perjury, I declare to the best of my knowledge and belief, this return and accompanying schedules reflect my true tax status.

SIGN	Your signature	Date	Spouse's signature	Date
HERE				

Third Party Designee	Name of designee (if any) you authorize to discuss this return	Designee's telephone number	Designee PIN	•
Paid Preparer's	Preparer's signature	Date	Preparer's telephone number	Preparer's SSN/PTIN
Section	Firm's name and address			Preparer's EIN